10/068 700

•								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			17				F	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	BASIC FEE 370.0		OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			17 minus 20=		. 0		,	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			5 minus 3 =		・ 2			X42= 84		OR	X84=		
ΜŲ	LTIPLE DEPEN	DENT CLAIM P	RESENT					140=		OR	+280=		
* If	the difference	in column 1 is	less than zero, enter "0" in o			column 2	· T	TOTAL 45		OR	TOTAL		
CLAIMS AS AMENDED - PART II								'		•	OTHER		
		(Column 1)	(Colum			(Column 3)	SMALL			OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	f	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 20	Minus	** 7	,o	s .	,	K\$ 9 =	1	OR	X\$18=		
	Independent	• 8	Minus	hich	5	= 3		X40=	129	OR	X84=		
Ù	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	T CLAIM		<u>ا</u> ا	140=.		OR	+280=		
`								TOTAL ADDIT, FEE		ΛĐ	TOTAL ADDIT, FEE		
		(Column 1)	(Column 3)	_ ADI	D11. FEE			POOII, I LL					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	##		= .] [;	X\$ 9=		OR	X\$18=		
	independent	*	Minus	***		1=	 	X42=		OR	X84=		
Ľ	FIRST PRESE	NTATION OF ME	JLTIPLE DEF	ENDEN	I CLAIM		٦	140=		OR	+280=		
								TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE		
	(Column 1) (Column 2) (Column 3)										ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA	7	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=] [;	X\$ 9=		OR	X\$18=		
	Independent	4	Minus	***		<u> </u>	4	X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									•	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												 	
* If the entry in column 1 is less than the entry in column 2, write "U" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

FORM PTO-875 (Rev. 8/01)

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